

Steven K. Young, Director

CMS Publishes Final Patients' Rights Rule on Use of Restraints and Seclusion

DES MOINES, IOWA (January 3, 2007) – Health care workers who employ physical restraints and seclusion when treating patients must undergo new, more rigorous training to assure the appropriateness of the treatment and to protect patient rights, Iowa Department of Inspections and Appeals (DIA) Director Steve Young said. A new federal regulation published by the Centers for Medicare & Medicaid Services (CMS) creates an expectation that health care facilities will protect the rights of patients.

"The CMS regulation will hold all hospitals accountable for the appropriate use of restraint and seclusion," Young stated, adding, "This action reinforces our commitment to patient safety and the delivery of high quality health care services."

The revised patients' rights regulation takes effect February 6, 2007. The basic rights specified in the regulation include a patient's right to notification of his or her rights in regard to their care, privacy and safety, confidentiality of their records, and freedom from the inappropriate use of all restraints and seclusion, in all hospital settings, the Director explained. The requirement applies to all participating hospitals including short-term, psychiatric, rehabilitation, long-term, children's and alcohol/drug treatment facilities.

The final regulation strengthens the staff-training standard and specifies components of the training. The rule also expands the category of practitioners who may conduct patient evaluations when a restraint or seclusion tactic has been implemented.

CMS currently requires that a patient be evaluated "face-to-face" within an hour of being restrained or secluded for the management of violent or self-destructive behavior. Prior to this rule, these actions had to be reviewed within that hour by a physician or "other licensed independent practitioner (LIP)." The revised regulations expand that list to include a trained registered nurse (RN) or physician assistant (PA). The rule requires, however, that when an RN or PA performs the one-hour-rule evaluation, the physician or other LIP treating that patient be consulted as soon as possible.

Under the revised regulations, hospitals must provide the patient or family member with a formal notice of their rights at the time of admission. These rights include freedom from restraints and seclusion in any form when used as a means of coercion, discipline, convenience for the staff, or retaliation. Stricter standards for when a healthcare facility must report the death of a patient associated with the use of restraints and seclusion have also been adopted with this rule.

It should be noted that the revised patients' rights regulation applies only to the 41 Medicare certified hospitals operating in Iowa. Critical access hospitals in Iowa, of which there are 82, do not have the same regulations as they are certified under a different set of Patients Rights standards.

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Revised Hospital CoP